PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTA For FY 2005

Applicant claims small entity s	tatus.	See 37	CFR 1	.2
TOTAL AMOUNT OF PAYMENT	(\$)		300.0	n

Complete if Known					
Application Number	10/658,797				
Filing Date	September 10, 2003				
First Named Inventor	Scott Bysick et al.				
Examiner Name	Sue A. Weaver				
Art Unit	3727				
Attorney Docket No.	29953-184845				

METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: VENABLE LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
WARNING: Information on th	is form may b	ecome public. (credit card inform	ation should n	ot be included	on this form. Pro	ovide credit card		
information and authorization	n on PTO-2038	3.							
FEE CALCULATION	<u> </u>								
1. BASIC FILING, SEA	1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
		Small Entity	SEARCH S	mall Entity		Small Entity			
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)		
Utility	300	150	500	250	200	100	<u> </u>		
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FE	ES					Fee (\$)	Small Entity		
<u>Fee Description</u> Each claim over 20 (including I	Peiccuec)				50	<u>Fee (\$)</u> 25		
Each independent cla			eissues)			200	100		
Multiple dependent		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			360	180		
Total Claims	Extra Clai	ms Fee (\$)	nid (\$)		Multiple Der	endent Claims		
20 or HP =		x <u>50</u>	=300.	00		<u>Fee (\$)</u>	Fee Paid (\$)		
HP = highest number of tota Indep. Claims	al claims paid f Extra Clai			id (\$)					
Indep. Claims									
HP = highest number of inde	•	s paid for, if grea	ter than 3.						
3. APPLICATION SIZE	FEE	evceed 100 s	heets of naner	(excluding	electronicall	v filed sequen	ce or computer		
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =									
4. OTHER FEE(S)		/ 30 -	('	cana ap to a	oic Hamber	', ^	Face Boild (ft)		
Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)		
Other (e.g., late filin	ng surcharge	e):							

SUBMITTED BY Registration No. (Attorney/Agent) 47,070 Telephone (202) 344-4295 Signature Date November 9, 2005 Name (Print/Type) Steven J. Schwarz

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reapplication of:

Art Unit: 3727

Appl. No.: 10/658,797

Examiner: Sue A. Weaver

Confirmation No.: 1814

Atty. Docket No.: 29953-184845

Filed: September 10, 2003

(ity. Docket 140.. 27733-164643

For: DEFORMATION RESISTANT

PANELS

Customer No.

26694

PATENT TRADEMARK OFFICE

Amendment

Mail Stop Amendment Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In response to the Office Action dated August 9, 2005, please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper;

Amendments to the Claims begin on page 3 of this paper;

Amendments to the Drawings begin on page 9 of this paper; and

Remarks begin on page 10 of this paper.

11/10/2005 HALI11 00000170 220261 10658797

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